(1) Coverage	(2)	
<u>Coverage</u>	(2)	(3)
	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
Private Passenger		
Commercial		
• •		
•		
	Warnish Service	
· · · · · · · · · · · · · · · · · · ·		
-		
	18,616,355	+2.7%
Other		
	Commercial Automobile Physical Damage Private Passenger Commercial Aiability Other Than Auto Burglary and Theft Glass Fidelity Furety Boiler and Machinery Fire Extended Coverage Finland Marine Homeowners Commercial Multi-Peril Frop Hail Other	Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Furety Foiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Frop Hail

ACE American Insurance Co.
Name of Company

Renice Cox, Regulatory Specialist
Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

Change in Company's premiur	m or rate level produced by rate revision effective	03/01/09
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Private Passenger Commercial 2. Automobile Physical Dama Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other	559,475	+2.7%
	ritory (territories) or certain classes? If so, specify	:
N/A		
The purpose of this filing is to	follows rates of an advisory organization, specify to adopt the following Insurance Services (kage Modification Factors references filing ne overall rate change is +2.7%.	Office, Inc. (ISO) Commercial
* Adjusted to reflect all prior rate ** Change in Company's premium result from application of new ra	level which will	
	ACE	FireUnderwriters
		Name of Company

	Change in Company's premium or rat	e level produced by rate revision effective	03/01/09
	(1)	(2)	(3) Percent
	Coverage	Annual Premium Volume (Illinois)*	Change (+ or -)**
	Private Passenger		
^	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial	-	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	439,071	+2.7%
14.	Crop Hail		
15.	Other		
Does to		erritories) or certain classes? If so, specify:	
The Pack effect	purpose of this filing is to adop	s.	office, Inc. (ISO) Commercial
7.0	approximation of new fution	ACE I	Property & Casualty
		ACE	Toperty & Casualty

ACE Property & Casualty
Insurance Company
Name of Company

Renice Cox, Regulatory Specialist
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

DEC 1 2 2008

SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective 2-1-09New and 4-1-09Renewal business .

-	(1)	(2) Annual Premium	(3) Percent
_	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$31,660	.4
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa	ain territory (territories) or	certain
	Classes? If so,		
	- F		ne confinement coverage "G" classes
	and changed the rating of coverage for dis		
	Brief description of filing. (If f	filing follows rates of an ac	dvisory
	Organization, specify		
	organization):	see attached page 2	
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	nium level which will resul	t from application of new
	rates.		_
		Agri General Insura	
		Nar	ne of Company

Serff RNHL-125864867

pglof2

Steve C. Harms President and Chairman of the Board
Official – Title

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

1) No premium change to existing book of business - company multistate rules:
Rule 30 disruption of farming operations
Rule 35 type of classification of farm buildings:
change C. barns, stables and outbuildings to delete swine and poultry buildings:
delete livestock confinement buildings and add poultry and swine confinement buildings
Rule 36 change C.4.e and C.8.e. deductibles to add separate deductible tables for poultry and swine
confinement buildings

2) No premium change to existing book of business -company multistate loss costs: Rule 36 change C.4.e and C.8.e. deductibles to add separate deductible tables for poultry and swine confinement buildings Rule 37.S changed 2. to 3. and 3. to 4. (numbering correction)

3) <u>Premium change is .4 increase to our existing book of business</u> - company state loss cost: Rule 36 coverage "G" add loss cost for poultry and swine confinement buildings

4) No premium change to existing book of business -company state rule exception manual change: Changed deviations for coverage G - Other Farm Structures:

a) took out deviation for Poultry Confinement Buildings without heat or with central heat, or heat from outside source, type 1,2, 3 and with heat other than above

b) added Swine Confinement Buildings and Poultry Confinement Buildings deviation

ILLINOIS DEPARTMENT OF INSURANCE

Cha	ange in Company's premium or rate le	vel produced by rate revision effective	1.2% 4-1-9
	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
		VOICE (INTIDIO)	
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage		
2	Private Passenger Commercial	-	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
	Glass		
	Fidelity	-	
	Surety	-	
	Boiler and Machinery Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners	-	
	Commercial Multi-Peril	2,481,685	+7.2%
	Crop Hail	2,701,000	1.270
	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (territories) or certain classes? If so, specify: N	V/A
<u>:</u>			
		rates of an advisory organization, specify organization	
we	are filling to adopt rates applicable for	Contractor policies.	
*^^	justed to reflect all prior rate changes		
**	hange in Company's premium level w	hich will result from application of new rates.	
C	nange in Company's premium level w	men will result from application of new rates.	
		AMCOL	nsurance Company
			ame of Company
			and or company
			and or company
			d - State Filing Specialist

Change in Company's premium revision effective 05/01/2	n or rate level produced b	by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft 5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		•
10. Extended Coverage		
l1. Inland Marine		
12. Homeowners	4200 000 (IMITEMENI)	+2.7%
13. Commercial Multi-Peril	\$320,809 (WRITTEN)	+2.78
14. Crop Hail 15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: N/A	territory (territories)or	certain classes?
Brief description of filing. (If organization	filing follows rates of a a): Delay adoption of ISO Filing # ML-2008-RLA	O Rules Reference
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new Am	el which will	ance Corporation
	Name of Compa	
	Stephen J. Corbett - V	ice President
	Official - Tit	

	Change in Company's premium or rate	e level produced by rate revision effective	May 1, 2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability	·	•
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$386,981	+5.6%
14.	Crop Hail	4500,501	
14. 15.	Other		
13.	Line of Insurance		
	Line of insurance		
oes f	iling only apply to certain territory (te	rritories) or certain classes? If so, specify:	
NA			
rief o	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
We.	are revising our company devia	tions.	
	djusted to reflect all prior rate changes		
	hange in Company's premium level wh	nich will	
re	sult from application of new rates.		·

Insurance Company
Name of Company

American Hardware Mutual

Michael L. Wiseman, Treasurer, CFO Official - Title

	Change in Company's premium or rat	te level produced by rate revision effective	May 1, 2009
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril 600	\$131,721	-16.6%
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	îlling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
We		s rates of an advisory organization, specify of plier to be applied to the loss costs cu	
* A	djusted to reflect all prior rate change	s	
** C	hange in Company's premium level w	hich will	
	sult from application of new rates.		•

American Hardware Mutual Insurance Company
Name of Company

Michael L. Wiseman, Treasurer, CFO
Official - Title

Change in Company's premium or rate level produced by rate Revision effective <u>04/01/09</u>

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
	Fidelity		
6.	•		
7.	Surety		
8.	Boiler and Machinery	14-14	
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	3,954,536	0.3%
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does	. filing only apply to certain territory (t	erritories) or certain classes? If:	so, specify:
Docs	ining only upply to cortain territory (311.001.0 5) 01 301.00 11 31.005	, op, -
_			
Brief	description of filing. (If filing follow	s rates of an advisory Organizati	on, specify organization):
	usting our package modification fac		
	rse And Country Club Program.		
	, , , , , , , , , , , , , , , , , , ,		
* A	djusted to reflect all prior rate change	s.	
	hange in Company's premium level w		of new rates.
_	g	**	
			ern Insurance Company
		Name	of Company
		Ional Marra	Descend Analyst
			- Research Analyst
		UIT	iciai - Tiue

Change in Company's premium or rate level produced by rate Revision effective <u>04/01/09</u>

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
	-		_
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$5,796	-11.88%
14.	Crop Hail	43,770	
15.	Other		
15.	Line of Insurance		
	Ente of histirance		
Does	filing only apply to certain territory (t	erritories) or certain classes? If s	o, specify:
		•	
	description of filing. (If filing follows		
Con	verting our independent Garageow	ners Program to a new Auto Se	rvice And Repair
Pack	tage Program under the CLM.		
* A	djusted to reflect all prior rate change	s.	
** C	hange in Company's premium level w	hich will result from application	of new rates.
		C 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			rn Insurance Company
		Name	of Company
		Janel Myers -	Research Analyst
		Offic	cial - Title
H292	19D		

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	inge in Company's premium or rate level produced by	y rate revision effective	05/01/09
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
-	Inland Marine Homeowners		
	Commercial Multi-Peril (Ultrapack) (9/30/08)	\$1,228,142	3.0%
	• • • • • • • • • • • • • • • • • • • •	Ψ1,220,142	0.070
	Crop Hail Other		
13.	Line of Insurance		
	Ellie of Misurance		
Doc	es filing only apply to certain territory (territories) or co	ertain classes? If so, specify:	No.
Brid	ef description of filing. (If filing follows rates of an adv	visory organization, specify orga	nization):
Ch	anges to base rates, building increased liability relativ	vities, minimum premiums, buildi	ng age discounts, zone
	initions, accounts receivable rates, and valuable paper	ers & records rates. Also, additi	on of Increased Limits
on	Medical Payments coverage.		
	djusted to reflect all prior rate changes. Change in Company's premium level which will result t	from application of new rates.	
		Erie Insura	ance Exchange
			of Company
		for Intell	-
		Ross C. Fonticella, ACAS, MA	NA .
		Vice President and Manager	

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced	by rate revision effective	05/01/09
(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)*</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11, Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril (Ultraflex) 10/31/2008	\$ 9,481,463	+10.0%
14. Crop Hail		
15. Other	:	
Line of Insurance	united the second secon	
Does filing only apply to certain territory (territories) or	certain classes? If so, specify:	No
	and the second s	
90. 1		
Brief description of filing. (If filing follows rates of an ac	dvisory organization, specify or	ganization):
See Actuarial Memorandum		
*Adjusted to reflect all prior rate changes.		Company Comp
**Change in Company's premium level which will resul	t from application of new rates.	
	-	
		ance Exchange
en en ministration de la company de la c La company de la company d	Name	of Company
그렇게 있었다면 하는 사람들은 사람들이 되었다.	(Marsh to	
	_ you force	ω
	Ross C. Fonticella, ACAS, M	
	Vice President and Manager	

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective				05/01/09	
	(1)		(2) Annual Premium	(3) Percent	
	Coverage		Volume (Illinois)*	Change (+ or -)**	
1.	Automobile Liability Private	•			
	Passenger Commercial				
2.	Automobile Physical Damage			·	
	Private Passenger Commercial				
3.	Liability Other Than Auto				
4.	Burglary and Theft				
5.	Glass				
6.	Fidelity				
7.	Surety				
	Boiler and Machinery				
	Fire				
10.	Extended Coverage	•			
11.	Inland Marine				
12.	Homeowners	Υ			
	CMP (Ultrasure for PO)	(9/30/08)	\$2,287,593	3.0%	
	Crop Hail	, ,			
	Other				
	Line of Insurance				
Do	es filing only apply to certain territory (t	erritories) or certain	classes? If so, specify:	No.	
Ch acc	ef description of filing. (If filing follows anges to building base rates, construct counts receivable rates, and valuable payments coverage.	tion and protection of	class factors, building age disc	ounts, zone definitions,	
···	7				
	djusted to reflect all prior rate changes hange in Company's premium level wl		application of new rates.		
			Erie Insuranc	e Company	
			Name of 0	Company	
			Kon Fontial	'b	
			Ross C. Fonticella, ACAS, M	AAA	
			Vice President and Manager		
			Officia	f - Title	

	Change in Company's prem revision effective 3/15/2009		by rate
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	<u>Change (+ or -) **</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril	2,176,900	1.3
4.	Crop Hail		
5.	Other		
0.	Line of Insurance		
Doe	es filing only apply to certain territory (te	rritories) or certain classes? If	so, specify:
	ef description of filing. (If filing follows raterising type of business factors	ites of an advisory organization	n, specify organization):
* (Adjusted to reflect all prior rate chan Change in Company's premium level wh vill result from application of new rates.	ch	Federated Mutual Ins. Co.
			ne of Company
		₩	ward Hammel
			Vice President
			Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

DEC 1 2 2008

SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision-effective 2-1-09New and 4-1-09Renewal business.

-	(1)	(2) Annual Premium	(3) Percent	
_	Coverage	Volume (Illinois) *	Change (+or-) **	
1.	Automobile Liability Private			
	Passenger			
	Commercial			
2	Automobile Physical Damag		_	
	Private Passenger			
	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril	\$1,571,307	.4	
14.	Crop Hail	**************************************		
15.	Othe <u>r</u>			
	Life of Insurance			
Does filing only apply to certain territory (territories) or certain Classes? If so,				
			ne confinement coverage "G" classes	
	and changed the rating of coverage for disruption of farming operations.			
	Brief description of filing. (If filing follows rates of an advisory Organization, specify			
organization): see attached page 2				
	*Adjusted to reflect all prior ra	ate changes		
	**Change in Company's pren		t from application of new	
	rates.			

Indemnity Insurance Company of North America c/o Rain and Hail LLC

Name of Company

Steve C. Harms - President & Chairman Board

Official - Title

Serff # ACEH- 125864881

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

1) No premium change to existing book of business - company multistate rules:
Rule 30 disruption of farming operations
Rule 35 type of classification of farm buildings:
change C. barns, stables and outbuildings to delete swine and poultry buildings:
delete livestock confinement buildings and add poultry and swine confinement buildings
Rule 36 change C.4.e and C.8.e. deductibles to add separate deductible tables for poultry and swine
confinement buildings

2) No premium change to existing book of business -company multistate loss costs: Rule 36 change C.4.e and C.8.e. deductibles to add separate deductible tables for poultry and swine confinement buildings Rule 37.S changed 2. to 3. and 3. to 4. (numbering correction)

3) <u>Premium change is .4 increase to our existing book of business</u> - company state loss cost: Rule 36 coverage "G" add loss cost for poultry and swine confinement buildings

4) No premium change to existing book of business -company state rule exception manual change: Changed deviations for coverage G - Other Farm Structures:
a) took out deviation for Poultry Confinement Buildings without heat or with central heat, or heat

from outside source, type 1,2, 3 and with heat other than above b) added Swine Confinement Buildings and Poultry Confinement Buildings deviation

Official - Title

(Change in Company's premium or rate	e level produced by rate revision effect	ive 03/01/09
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	<u> </u>		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
•	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	1 207 270	12.70/
13.	Commercial Multi-Peril	1,387,370	+2.7%
14.	Crop Hail		14. 44.
15.	Other		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, spec	sify:
The Pack	purpose of this filing is to adop	rates of an advisory organization, spector the following Insurance Service Modification Factors references fiall rate change is +2.7%.	s Office, Inc. (ISO) Commercial
** C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.		
			demnity Insurance Company of orth America
			Name of Company
		Re	enice Cox. Regulatory Specialist

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate I	evel produced by rate revision effective	March 1, 2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passanger Commercial		
Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
 Boiler and Machinery Fire 		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	924,107	-9.0%
14. Crop Hail		
15. Other Line of Insurance		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	No
Does liling only apply to certain territory	(territories) or certain diasses. If so, specify.	
Brief description of filing. (If filing follows Fire and Allied Lines Advisory Prospect	s rates of an advisory organization, specify or ive Loss Cost Revision, ISO Filing CF-2008-F	ganization): <u>ISO Revised Commercial</u> RLA1
*Adjusted to reflect all prior rate change **Change in Company's premium level	s. which will result from application of new rates	s.
•	Navigate	ors Insurance Company
		Name of Company
	Jo	anne Burns, AVP
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	evel produced by rate revision effective	May 1, 2009
(1) Covera <u>ge</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	5,800,233	+7.5%
14. Crop Hail		
15. Other Line of Insurance		
Line of Insurance		
	(1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NI
Does filing only apply to certain territory ((territories) or certain classes? If so, specify:	NO
Brief description of filing (If filing follow	s rates of an advisory organization, specify	organization): Adopting ISO Filing
Missack and OL OCCO DOLA	o rates of all devisory organization, opening	
Number of 2000 Both		
*Adjusted to reflect all prior rate changes		
**Change in Company's premium level w	hich will result from application of new rates.	
oriange in company a premium level w	Thor will room application of flow rates	
•	Navigato	rs Insurance Company
		lame of Company
		• •
	Joa	anne Burns, AVP
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate	level produced by rate revision effective	January 1, 2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		.0.70/
13. Commercial Multi-Peril	6,724,340	+2.7%
14. Crop Hail		
15. Other Line of Insurance		
	(territories) or certain classes? If so, specify:	
Brief description of filing. (If filing foll Commercial Package Modification Fact	lows rates of an advisory organization, spoors, ISO filing ML-2008-RLA1.	ecify organization): Adoption of ISO
*Adjusted to reflect all prior rate change **Change in Company's premium level	es. which will result from application of new rates	
	Navigato	rs Insurance Company
		Name of Company
	Jo	anne Burns, AVP
		Official Title

	hange in Company's premium or rate level	January 1, 2009 for new business a	nd March 1, 2009 for
pr	oduced by rate revision effective	renewals.	(2)
	(1)	(2)	(3) Percent
	Coverage	Annual Premium Volume (Illinois)*	Change (+ or -)**
		Volume (Inmois)	Change (+ Or -)
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.		\$109,558,058	-0.9%
14.	Crop Hail		
15.	Other		
	Line of Insurance		27/
Does t	filing only apply to certain territory (territor	ries) or certain classes? If so, specify:	N/A
Brief o	description of filing. (If filing follows rates	s of an advisory organization, specify of	organization): Rate Revision
* ^	sted to reflect all prior rate changes.		
	hange in Company's premium level which	will	
	esult from application of new rates.	WIII	
	south from application of new rates.		
		State Form Fire and Cognetty Com	anomy.
	·	State Farm Fire and Casualty Com Name of Company	pany
	Gregor	ry S. Girard, Actuary and Assistant Sec	retary-Treasurer
		Official - Title	